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CONTACT: Peter Carr, Hatch (202) 224-9854
Laura Capps/Melissa Wagoner, Kennedy (202) 224-2633

HATCH, KENNEDY BILL TO HELP MILLIONS SUFFERING FROM TRAUMATIC BRAIN INJURY

Washington – Sens. Orrin G. Hatch (R-Utah) and Edward Kennedy (D-Mass.) today introduced legislation to reauthorize the only federal law specifically addressing issues faced by 5.3 million Americans who live with a long-term disability as a result of traumatic brain injury, or TBI. Hatch and Kennedy were the principal authors of the original TBI law in 1996.

“Those suffering from a traumatic brain injury deserve the best care possible,” Hatch said. “That’s the goal of this bill – to help patients get quality care early, so they can recover from this devastating injury. It’s difficult to describe the heavy physical, emotional, and financial toll caused by TBI. We need to reauthorize the TBI Act to not only improve the care the injured receive but also to help prevent others from suffering brain injuries in the first place.”

“This bill couldn’t be more timely or important -- it will help the thousands of soldiers coming home from Iraq and Afghanistan with traumatic brain injuries,” Kennedy said. “We need to fund programs that have helped individuals with traumatic brain injury with an array of advocacy needs including assistance with returning to work, finding a place to live, accessing needed supports and services such as attendant care and assistive technology, and obtaining appropriate mental health, substance abuse, and rehabilitation services. As a nation we owe it to our injured men and women in uniform to do all we can to provide them with the help they need to recover and live fulfilling lives.”

Brain injuries are the most frequent reasons for visits to physicians and emergency rooms, the most common causes being falls and car crashes. Of the 1.5 million people in the United States who sustain a TBI each year, 50,000 die, 235,000 are hospitalized, and 1.1 million are treated and released from an emergency department. An extremely high incidence of TBI occurs among children between birth and age 14 – approximately 475,000 per year. The TBI Act would continue essential federal funding for programs within the Centers for Disease Control (CDC), National Institutes of Health (NIH), and Health Resources and Services Administration (HRSA) to conduct research on TBI, provide education and prevention programs and make available protection and advocacy services. The bill would reauthorize these programs through 2011, authorize a new study through CDC and NIH to determine the incidence and prevalence of TBI and instruct HRSA and the Administration on Developmental Disabilities to coordinate data collection regarding protection and advocacy services.

Below is a summary of the bill:

Traumatic Brain Injury Act Reauthorization SUMMARY

What is TBI:

Traumatic brain injury (TBI) is a blow or jolt to the head or a penetrating head injury that causes damage to the brain. Common causes include falls and car crashes. Every year, of the 1.5 million people in the United States who sustain a TBI, 50,000 die, 235,000 are hospitalized, and approximately 80,000 to 90,000 become disabled.

Who will this bill primarily help?

The bill will provide assistance to the millions of children and adults in our nation who are facing an array of problems because of TBI. The programs authorized under this bill can help the thousands of soldiers wounded in the war. As of February, 2007 -- almost 25,000 service members have been wounded in Iraq; brain injuries are approximately two-thirds of the injuries suffered in the war.

There is an extremely high incidence of TBI among children between birth and age 14 -- approximately 475,000 a year. Some of the highest numbers of injuries are among children under the age of five.

What will the bill do?

The bill expands the existing law enacted in 2000, with respect to TBI the reauthorization is crucial to essential federal funding for a range of TBI programs including reauthorize grants that have been assisting States, Territories, and the District of Columbia in building or enhancing coordinated systems of community-based services and support for children and adults with TBI. It will extend the ability to apply for these grants to American Indian consortia.

When Congress first authorized the TBI Act as part of the Children's Health Act of 2000 it included funding for a protection and advocacy programs for individuals with TBI. This program needed because persons with TBI have an array of needs including assistance in returning to work, finding a place to live, obtaining needed support and services such as attendant care assistive technology, and mental health, substance abuse, and rehabilitation services.

Often, these patients are forced to remain in extremely expensive institution far longer than necessary because community-based support and service are not available.

Effective protection and advocacy services for people with TBI will lead to reduced government expenditures and increased productivity, independence and community integration. The Advocates must possess specialized skills, and their work is often time-intensive.

The reauthorization:

Extends the authorization of such sums as are necessary for CDC research, public education, and state registry programs; NIH research; and programs through 2011.

Establishes a new study through CDC and NIH to determine the incidence and prevalence of TBI identify common therapeutic interventions, and develop rehabilitation guidelines.

Amends the HRSA demonstration project program so that American Indian consortia can apply for funding. Projects are redefined to improve access to rehabilitation, and grants are limited to 3 years.

Requires the Administrator of HRSA and the ADA Commissioner to coordinate data collection on protection and advocacy. It stipulates that, in any year in which at least \$6 million is appropriated for the HRSA protection and advocacy services, 2% must be used for grants for training and technical assistance to protection and advocacy programs.